# FISCAL YEAR ENDED: 12 / 31 / 14

#### ANNUAL REPORT CHECKLIST

PROVIDER(S): Bay Area Senior Services, Inc.
CCRC(S): The Peninsula Regent
CONTACT PERSON: Gary Homan
TELEPHONE NO.: ( 650 ) 425-4232 EMAIL: gary@peninsularegent.com
A complete annual report must consist of <u>3 copies</u> of all of the following:
🖸 Annual Report Checklist.
Annual Provider Fee in the amount of: \$ 9,857.53
☐ If applicable, late fee in the amount of: \$
<ul> <li>Certification by the provider's <i>Chief Executive Officer</i> that:</li> <li>The reports are correct to the best of his/her knowledge.</li> <li>Each continuing care contract form in use or offered to new residents has been approved by the Department.</li> <li>The provider is maintaining the required <i>liquid</i> reserves and, when applicable, the required refund reserve.</li> </ul>
Evidence of the provider's fidelity bond, as required by H&SC section 1789.8.
Provider's audited financial statements, with an accompanying certified public accountant's opinion thereon.
Provider's audited reserve reports (prepared on Department forms), with an accompanying certified public accountant's opinion thereon.
☑ Provider's "Continuing Care Retirement Community Disclosure Statement" and Form 7-1 "Report on CCRC Monthly Service Fees" for <i>each</i> community.
☐ Provider's Refund Reserve Calculation(s) — Form 9-1 and/or Form 9-2, if applicable.
The Key Indicators Report is required to be submitted within 30 days of the due date of the submission of the annual report, but may be submitted at the same time as the annual report.



### STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



April 13, 2015

Mr. Gary Homan Bay Area Senior Services 345 Spear Street, Suite 700 San Francisco, California 94105

Dear Mr. Homan:

This is in response to your April 10, 2014, request for an extension in filing the annual audited financial statements and reserve reports for fiscal year ending December 31, 2014 for Bay Area Senior Services dba The Peninsula Regent. The Department will allow the additional time requested and extend the due date to May 31, 2015. As a reminder, if the annual report is postmarked after that date, a \$1,000 late fee will be imposed as of the original due date of April 30, 2015, and an additional fine of \$33 per day thereafter until the complete annual report is received.

This also extends the due date for the Key Indicators Report which must be postmarked by June 30, 2015. If not received by that date, the Department will impose a late fee of \$1,000 as of the original due date of May 31, 2015, and an additional fine of \$33 per day thereafter until it is received.

If you have any questions, you may contact me at (916) 657-2592 or allison.nakatomi@dss.ca.gov.

Sincerely,

Allison Nakatomi, Manager

Continuing Care Contracts Branch

### FORM 1-1 RESIDENT POPULATION

Line	Continuing Care Residents	TOTAL
[1]	Number at beginning of fiscal year	244
[2]	Number at end of fiscal year	236
[3]	Total Lines 1 and 2	480
[4]	Multiply Line 3 by ".50" and enter result on Line 5.	x .50
[5]	Mean number of continuing care residents	240
	All Residents	
[6]	Number at beginning of fiscal year	244
[7]	Number at end of fiscal year	236
[8]	Total Lines 6 and 7	480
[9]	Multiply Line 8 by ".50" and enter result on Line 10.	x .50
[10]	Mean number of all residents	240
[11]	Divide the mean number of continuing care residents (Line 5) by the mean number of <i>all</i> residents (Line 10) and enter the result (round to two decimal places).	1.00
	FORM 1-2 <u>ANNUAL PROVIDER FEE</u>	

Line			TOTAL
[1]	Total Operating Expenses (including depreciation and debt s	ervice – interest only)	\$10,487,929
[a]	Depreciation	630,403	
[b]	Debt Service (Interest Only)		
[2]	Subtotal (add Line 1a and 1b)	-	630,403
[3]	Subtract Line 2 from Line 1 and enter result.	-	9,857,526
[4]	Percentage allocated to continuing care residents (Form 1-1,	Line 11)	100%
[5]	Total Operating Expense for Continuing Care Residents (multiply Line 3 by Line 4)	_	9,857,526
[6]	Total Amount Due (multiply Line 5 by .001)	-	x .001 \$9,857.53
	/IDER:Bay Area Senior Services, Inc.		
COM	MUNITY: The Peninsula Regent		_ FOGW 1-1 and Form 1-2



BUILDING SUSTAINING LEADING

BRIDGE HOUSING

BRIDGE PROPERTY

MANAGEMENT CORPORATION

BAY AREA SENIOR SERVICES, INC.

BRIDGE ECONOMIC
DEVELOPMENT CORPORATION

May 29, 2015

Department of Social Services Continuing Care Contracts Branch 744 P Street, M.S. 10-90 Sacramento, CA 95814

RE: 2014 Bay Area Senior Services, Inc. Reserve reports filed with The State of California DSS

To the best of my knowledge and belief, I certify the following to be correct:

- 1. The reports incorporated in the package are correct;
- 2. Each continuing care contract form in use or offered to new residents has been approved by The State of California Department of Social Services; and
- 3. Bay Area Senior Services, Inc. is maintaining the required liquid reserves.

Cynthia Parker President & CEO



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

L	certificate holder in lieu of such endo							ns ceruncate does not t	omer i	ignes to the
, , , ,	ODUCER				CONT	ACT Camero	on Burns			
Arthur J. Gallagher & Co. Insurance Brokers of CA. 1255 Battery Street #450			PHONE (AIC, No. Ext):415-546-4028 (AIC, No):415-536-8499 E-MAIL ADDRESS:				6-8499			
Sa	n Francisco CA 94111				ADDR					i
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	y Area Senior Services, Inc.	PEN	IIRE	<i>5</i> -01	1	ER C:	ortation Insu	rance Company		20494
DE	A: The Peninsula Regent				1	ERD:				
	e Baldwin Avenue п Mateo CA 94401				INSUR					
Оa	Milliateo CA 94401				INSUR	***************************************				
CC	OVERAGES CE	RTIFI	CAT	E NUMBER: 1351585663				REVISION NUMBER:		
1	HIS IS TO CERTIFY THAT THE POLICIE: NDICATED. NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PER: POLI	REME TAIN, ICIES	ENT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN	IY CONTRACT THE POLICIE REDUCED BY	OR OTHER S DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPE D HEREIN IS SUBJECT T :	CT TO Y	WHICH THIS
INS!	TYPE OF INSURANCE	ADDI	SUBF	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	ıs	
A	GENERAL LIABILITY	I		PLO508594763			5/1/2015	EACH OCCURRENCE	\$1,000.	000
	X COMMERCIAL GENERAL LIABILITY							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,00	
	CLAIMS-MADE X OCCUR						***************************************	MED EXP (Any one person)	\$5,000	10.00 pys
	X Prof Liability							PERSONAL & ADV INJURY	\$1,000,	000
			Ì				•	GENERAL AGGREGATE	\$3,000,	000
	GEN'L AGGREGATE LIMIT APPLIES PER:						1	PRODUCTS - COMP/OP AGG	\$3,000,	000
	X POLICY PRO-	<u> </u>	<u> </u>					Employee Benefits	\$1,000,	000
В	AUTOMOBILE LIABILITY	l		BUA5086694732		5/1/2014	5/1/2015	COMBINED SINGLE LIMIT (Ea accident)	s1.000,	000
	ANY AUTO SCHEDULED							BODILY INJURY (Per person)	s	
	AUTOS AUTOS NON-OWNED							BODILY INJURY (Per accident)		
	HIRED AUTOS AUTOS							PROPERTY DAMAGE (Per accident)	s	
	X UMBRELLA LIAB LOCCUB		<u> </u>	  UMB5086694777		5/1/2014	Cid IOD4C		S	
•						2/1/2014	5/1/2015	EACH OCCURRENCE	\$5,000,0	
	DED X RETENTION \$10,000							AGGREGATE	\$5,000,0	000
	WORKERS COMPENSATION		<u></u>	ļ				WC STATU- OTH- TORY LIMITS ER	S	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	s	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	NIA						E.L. DISEASE - EA EMPLOYEE		
	If yas, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT		
								, are proposed to one of the	<u> </u>	·
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	ttach /	ACORD 161, Additional Remarks S	Schedulo	, if more space is	required)			
vid	ence of Liability. Per contract on file	with	ı insı	ared.						
CEF	RTIFICATE HOLDER				CANO	ELLATION				
Department of Social Services Community Care Licensing 851 Traeger Avenue, Suite 2360			munity Care Licensing	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				ED BEFORE IVERED IN		
	San Bruno CA 94066				AUTHORIZED REPRESENTATIVE					



#### **EVIDENCE OF COMMERCIAL PROPERTY INSURANCE**

DATE (MM/DD/YYYY) 5/5/2014

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST. PRODUCER NAME,

CONTACT PERSON AND ADDRESS (AC. No. Ext): 415-546-9300 COMPANY NAME AND ADDRESS NAIC NO: 20427 American Casualty Company of Reading, PA Arthur J. Gallagher & Co. Insurance Brokers of CA. 1255 Battery Street #450 333 South Wabash Avenue Chicago IL 60604 San Francisco CA 94111 E-MAIL ADDRESS; cameron\_burns@ajg.com FAX (AC, No): 415-536-8499 IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH CODE: SUB CODE: POLICY TYPE AGENCY CUSTOMER ID #; NAMED INSURED AND ADDRESS LOAN NUMBER POLICY NUMBER Bay Area Senior Services, Inc. LHH5086694746 DBA: The Peninsula Regent **EFFECTIVE DATE EXPIRATION DATE** One Baldwin Avenue CONTINUED UNTIL 5/1/2014 5/1/2015 San Mateo, CA 94401 TERMINATED IF CHECKED ADDITIONAL NAMED INSURED(S) THIS REPLACES PRIOR EVIDENCE DATED: PROPERTY INFORMATION (Use REMARKS on page 2, if more space is required) ☐ BUILDING OR ☐ BUSINESS PERSONAL PROPERTY LOCATION/DESCRIPTION One Baldwin Avenue, San Mateo< CA 94401 THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. **COVERAGE INFORMATION PERILS INSURED** BASIC BROAD SPECIAL COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 75,627,185 DED: 5,000 YES NO NIA IF YES, LIMIT: 9,100,000 X BUSINESS INCOME RENTAL VALUE Actual Loss Sustained; # of months: BLANKET COVERAGE If YES, indicate value(s) reported on property identified above; S TERRORISM COVERAGE Attach Disclosure Notice / DEC IS THERE A TERRORISM-SPECIFIC EXCLUSION? IS DOMESTIC TERRORISM EXCLUDED? LIMITED FUNGUS COVERAGE If YES, LIMIT: DED: FUNGUS EXCLUSION (If "YES", specify organization's form used) REPLACEMENT COST AGREED VALUE COINSURANCE If YES. % 100 EQUIPMENT BREAKDOWN (If Applicable) If YES, LIMIT: 73, 947, 185 DED: 5,000 ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg If YES, LIMIT: DED: IFYES, LIMIT: 10,000,000 - Demolition Costs DED: 5,000 - Incr. Cost of Construction MYES, LIMIT: Incl. in above DED: 5,000 X EARTH MOVEMENT (If Applicable) IFYES, LIMIT: DED: FLOOD (If Applicable) If YES, LIMIT: DED: WIND / HAIL (If Subject to Different Provisions) If YES, LIMIT: PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST LENDER SERVICING AGENT NAME AND ADDRESS MORTGAGEE CONTRACT OF SALE LENDERS LOSS PAYABLE NAME AND ADDRESS Department of Social Services Community Care Licensing 851 Traeger Avenue, Suite 2360 San Bruno CA 94066 **AUTHORIZED REPRESENTATIVE** 

EVIDENCE OF COMMERCIAL PROPERTY INSURANCE REI	MARKS - Including Special Conditions (Use only if more space is required)
ACORD 28 (2011/11)	Page 2 of 2

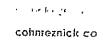
Financial Statements (With Supplementary Information) and Independent Auditor's Report

December 31, 2014 and 2013

#### <u>Index</u>

	<u>Page</u>
Independent Auditor's Report	2
Financial Statements	
Statements of Financial Position	4
Statements of Activities	6
Statements of Functional Expenses	8
Statements of Cash Flows	9
Notes to Financial Statements	11
The Peninsula Regent - Schedules of Assets, Liabilities and Net Assets	20
The Peninsula Regent - Schedules of Revenue, Expenses and Changes in Net Assets	22





#### Independent Auditor's Report

Board of Directors
Bay Area Senior Services, Inc., a California nonprofit public benefit corporation

We have audited the accompanying financial statements of Bay Area Senior Services, Inc., a California nonprofit public benefit corporation, which comprise the statement of financial position as of December 31, 2014, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Bay Area Senior Services, Inc. as of December 31, 2014, and the results of its operations and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

#### Other Matter

The financial statements of Bay Area Senior Services, Inc. as of December 31, 2013, were audited by other auditors whose report dated May 1, 2014 expressed an unmodified opinion on those statements.

#### Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying supplementary information on pages 20 and 22 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole. The 2013 supplementary information on pages 20 and 23 was subjected to the auditing procedures applied in the 2013 audit of the basic financial statements by other auditors, whose report on such information stated that it was fairly stated in all material respects in relation to the 2013 financial statements as a whole.

Los Angeles, California

CohnReynickZZF

April 29, 2015

#### Statements of Financial Position December 31, 2014 and 2013

#### <u>Assets</u>

	2014	2013
Current assets		
Cash		
Operating cash Designated for	\$ 2,329,354	\$ 1,961,568
Replacement reserves	1,579,240	1,562,327
Healthcare insurance reserves	1,600,955	•
Refundable resident fees	153,268	185,407
Operating reserves	1,242,367	1,381,071
Total cash	6,905,184	6,778,702
Receivables		
Residents	52,347	,
Other	8,237	
Prepaid expenses and other current assets	181,832	143,074
~~		
Total current assets	<u>7,147,600</u>	7,033,899
Noncurrent assets		
Receivables from residents - long-term	47,950	235,226
Property and equipment, net	3,915,185	3,877,990
Total noncurrent assets	3,963,135	4,113,216
Total assets	\$ 11,110,735	<u>\$ 11,147,115</u>

## Statements of Financial Position December 31, 2014 and 2013

#### Liabilities and Net Assets

	2014	2013
Current liabilities Accounts payable and accrued liabilities Related party payable	\$ 335,822 747,140	\$ 436,431 693,340
Total current liabilities	1,082,962	1,129,771
Refundable resident fee	153,269	188,533
Total liabilities	1,236,231	1,318,304
Net assets Unrestricted net assets Temporarily restricted net assets	9,874,504	9,822,122 6,689
Total net assets	9,874,504	9,828,811
Total liabilities and net assets	<u>\$ 11,110,735</u>	<u>\$ 11,147,115</u>

# Statements of Activities Years Ended December 31, 2014 and 2013

	2014				
	Unrestricted	Temporarily restricted	Total		
Support and revenue Resident fees and services Transfer fees Investment and interest income Net assets released from restrictions	\$ 10,548,173 3,040,138 12,793 6,689	\$ - - (6,689)	\$ 10,548,173 3,040,138 12,793		
Total support and revenue	13,607,793	(6,689)	13,601,104		
Program services The Peninsula Regent project expenses	13,305,346	-	13,305,346		
Supporting services  Management and general	250,065	· · · · · · · · · · · · · · · · · · ·	250,065		
Total expenses	13,555,411	***	13,555,411		
Change in net assets	52,382	(6,689)	45,693		
Net assets, beginning of year	9,822,122	6,689	9,828,811		
Net assets, end of year	\$ 9,874,504	\$ -	\$ 9,874,504		

# Statements of Activities Years Ended December 31, 2014 and 2013

	2013				
	Unrestricted	Temporarily restricted	Total		
Support and revenue Resident fees and services Transfer fees Investment and interest income Contributions Net assets released from restrictions	\$ 10,688,839 2,686,804 12,921 - 147,699	\$ - - 148,716 (147,699)	\$ 10,688,839 2,686,804 12,921 148,716		
Total support and revenue	13,536,263	1,017	13,537,280		
Program services The Peninsula Regent project expenses	13,154,948	~	13,154,948		
Supporting services Management and general	455,790		455,790		
Total expenses	13,610,738		13,610,738		
Change in net assets	(74,475)	1,017	(73,458)		
Net assets, beginning of year	9,896,597	5,672	9,902,269		
Net assets, end of year	\$ 9,822,122	\$ 6,689	\$ 9,828,811		

#### Statements of Functional Expense Years Ended December 31, 2014 and 2013

		2014				
	************	Program Supporting services services				
	T1	The Peninsula Regent		Management and general		Total
Resident services General and administrative Taxes, utilities and insurance Repairs and maintenance Lease expense Depreciation Transfer to affiliate	\$	5,735,399 1,986,432 863,687 1,222,004 2,667,421 630,403 200,000	\$	238,462 11,603 - - - -	\$	5,735,399 2,224,894 875,290 1,222,004 2,667,421 630,403 200,000
Total expenses	\$	13,305,346	\$	250,065	\$	13,555,411
				2013		
	an are the party of the party o	Program services		pporting ervices		
	Th	e Peninsula Regent		nagement d general		Total
Resident services General and administrative Taxes, utilities and insurance Repairs and maintenance Lease expense Depreciation Transfer to affiliate	\$	6,072,486 1,930,391 842,072 1,086,918 2,400,855 525,088 297,138	\$	409,651 9,926 - - 36,213	\$	6,072,486 2,340,042 851,998 1,086,918 2,400,855 561,301 297,138
Total expenses	\$	13,154,948	\$	455,790	\$	13,610,738

#### Statements of Cash Flows Years Ended December 31, 2014 and 2013

	2014	2013
Cash flows from operating activities Resident fees and services receipts Transfer fees received Restricted receipts	\$ 10,577,096 3,040,138 -	, , , , , , , , , , , , , , , , , , , ,
Receipts for guest rooms and meals Investment and interest income	174,628 12,793	45,601
Total cash receipts	13,804,655	13,472,992
Cash disbursements		
Resident services expenses	(5,719,441	· · · · · · · · · · · · · · · · · · ·
General and administrative expenses	(2,326,419	
Taxes, utilities and insurance expenses	(875,290	, , , , , , , , , , , , , , , , , , , ,
Repairs and maintenance expenses Lease expense	(1,222,004	
Transfer to affiliate	(2,667,421) (200,000)	, , ,
Transfer to annate	(200,000	) (297,138)
Total cash disbursements	(13,010,575	(12,946,570)
Net cash provided by operating activities	794,080	526,422
Cash flows from investing activities		
Purchase of property and equipment	(667,598)	(1,074,179)
Net decrease in reserve accounts	241,304	686,021
Net decrease in other investments	-	175,431
	······································	
Net cash used in investing activities	(426,294)	(212,727)
Net change in cash	367,786	313,695
Cash, beginning of year	1,961,568	1,647,873
Cash, end of year	\$ 2,329,354	\$ 1,961,568

#### Statements of Cash Flows Years Ended December 31, 2014 and 2013

	2014		2013 .	
Reconciliation of change in net assets to net cash				
provided by operating activities				
Change in net assets	\$	45,693	\$ (73,458)	
Adjustments to reconcile change in net assets to net				
cash provided by operating activities				
Depreciation		630,403	561,301	
(Increase) decrease in assets				
Accounts receivable		238,815	(20,206)	
Prepaid expenses and other current assets		(38,758)	43,785	
Increase (decrease) in liabilities				
Accounts payable and accrued liabilities		(100,609)	82,160	
Related party payable		53,800	(23,078)	
Deferred revenue		(35,264)	 (44,082)	
Net cash provided by operating activities	\$	794,080	\$ 526,422	
Supplemental disclosure of noncash investing and financing activities				
Assets acquired by assuming current liabilities	\$	*	\$ 39,562	

### Notes to Financial Statements Years Ended December 31, 2014 and 2013

#### Note 1 - Organization and nature of activities

Bay Area Senior Services, Inc. (the "Company"), a California nonprofit public benefit corporation, was incorporated on July 1, 1986 to provide housing designed to meet the specialized needs of senior citizens within the San Francisco Bay Area. The Company was formed as a support organization for, and is an affiliate of, BRIDGE Housing Corporation ("BRIDGE"), a nonprofit corporation located in San Francisco, California. Directors and officers of BRIDGE form the board of directors of Bay Area Senior Services, Inc., except for one director who is a Member of The Peninsula Regent. All directors serve without compensation.

The Company, doing business as The Peninsula Regent, is the lessee and operator of The Peninsula Regent ("TPR"), a continuing care retirement community located in San Mateo, California. The land and common area improvements of TPR are owned and were developed by BAC Associates ("BAC"), a California limited partnership. TPR consists of 207 individually owned residential condominium units, 20 assisted living units and supporting dining, wellness and recreation facilities. TPR was placed in service in 1988. Each resident of The Peninsula Regent becomes a Member of the Home Owners' Association and a Member of the Continuing Care Members Association ("Member").

#### Note 2 - Summary of significant accounting policies Accounting method

The Company uses the accrual method of accounting, which recognizes income in the period earned and expenses when incurred, regardless of the timing of payments. The Company has adopted the applicable provisions of the *Audit and Accounting Guide for Health Care Entities* of the American Institute of Certified Public Accountants with respect to accounting for the long-term obligation to provide continuing care and the use of the facilities to current Members.

#### **Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America ("GAAP") requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results may differ from those estimates.

#### Basis of presentation

The Company reports information regarding its financial position and activities according to up to two classes of net assets, as applicable: unrestricted net assets and temporarily restricted net assets.

#### Cash

Cash is defined as cash in demand deposit accounts and savings accounts as well as cash on hand. Certain cash is designated by management as to its use, such as refundable member fees, replacement reserves, healthcare insurance reserves and operating

### Notes to Financial Statements Years Ended December 31, 2014 and 2013

reserves. The Company maintains cash on deposit at a bank in excess of the Federal Deposit Insurance Corporation limit. The uninsured cash balance was approximately \$6,655,000 as of December 31, 2014. The Company has not experienced any losses in such accounts.

#### Accounts receivable

Management elects to record bad debts using the direct write off method. GAAP requires that the allowance method be used to reflect potential uncollectable accounts. However, the effect of the use of the direct write off method is not materially different from the result that would be obtained had the allowance method been followed.

#### Property and equipment

Property and equipment is stated at cost of acquisition or construction. The Company is obligated to pay for major repairs and replacements of property and equipment, and accordingly, collects monthly fees from the Members. All monthly fees received from the Members which are for major repairs and replacements are recorded as revenue. Expenditures for major repairs and replacements are recorded as additions to property and equipment. Recurring repairs not of a capital or long-term nature are expensed as incurred. Depreciation is computed based on the straight-line method over the estimated useful lives of the assets.

The Company incurs development costs related to leasehold improvements, which are considered to be construction in progress until the improvement is placed in service. Construction in progress is not depreciated.

The useful lives of the assets are estimated as follows:

Leasehold improvements

Furniture, fixtures and equipment

Vehicles

10 to 20 years
3 to 10 years
5 years

#### Resident fees and services

Revenue from Member fees and services is recognized in the period rendered. Each Member pays a monthly service fee based on their type of unit (8 types of units). Fees are updated annually on January 1 and regulations require a 60-day notice of any change.

#### Functional expenses allocation

The costs of providing program services and supporting services are summarized on a functional basis in the statements of activities and statements of functional expenses. Accordingly, certain costs have been allocated among program services and supporting services based on estimates of employees' time incurred and on usage of resources.

### Notes to Financial Statements Years Ended December 31, 2014 and 2013

#### Income taxes

The Company is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and state taxes under the California Revenue and Taxation Code Section 23701d.

The Company believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements. The Company's federal and state income tax returns for the years 2010 through 2013 are subject to examination by regulatory agencies, generally for three years and four years after they were filed for federal and state, respectively.

#### Note 3 - Designated replacement reserves - TPR

Designated replacement reserves consisted of interest-bearing cash balances.

Changes in the designated replacement reserves are as follows at December 31:

		2014	2013		
Beginning balance	\$	1,562,327	\$	2,062,890	
Interest income Additions		1,293 670,911		356 662,196	
		672,204		662,552	
Disbursements for property and equipment Disbursements for repairs and replacements	-	(525,290) (130,001)		(1,123,115) (40,000)	
Net changes during the year		16,913		(500,563)	
Ending balance	\$	1,579,240	\$	1,562,327	

A transfer to the operating account from this reserve account in the amount of \$59,412 was made in January 2015 reflecting year-end adjustments.

The Company has established replacement reserves for TPR's major repairs and replacements of building, property and equipment. An independent reserve study completed by an outside consultant in October 2013 set forth the projected cash expenditures that would be needed for major repairs and replacements for the years 2014 through 2043.

Replacement reserves funding is derived from a portion of the monthly service fees charged to the Members and allocated interest income. Member assessments for the designated replacement reserves and related allocated interest income are recorded as

### Notes to Financial Statements Years Ended December 31, 2014 and 2013

revenue. Cumulative expenditures for replacements and major repairs amounted to \$11,202,445 and \$10,547,154 through December 31, 2014 and 2013, respectively.

The funds held in these reserves are not restricted and may be used for current operations should the need arise. Interest income earned on the funds may be retained as an addition to the reserves, if designated as such by management.

#### Note 4 - Designated healthcare insurance reserves - TPR

Designated healthcare insurance reserves consisted of interest-bearing cash balances.

Changes in the designated healthcare insurance reserves are as follows at December 31:

		2014		2013
Beginning balance	\$	1,688,329	\$	1,801,346
Interest income Disbursements		1,258 (88,632)	**************************************	248 (113,265)
Net changes during the year	-	(87,374)		(113,017)
Ending balance		1,600,955	\$	1,688,329

A transfer to the operating account from this reserve account in the amount of \$7,962 was made in January 2015 reflecting year-end adjustments.

The designated healthcare insurance reserves were established to stabilize certain TPR's Members' future health care costs. This could include: to offset increases in long-term care insurance premiums; to reduce the cost to provide care to Members in their condominiums; to pay for care for Members who can no longer fully cover the costs themselves; and, to subsidize outside skilled nursing facilities direct costs.

The funds held in these reserves are not restricted and may be used for current operations should the need arise. Interest income earned on the funds may be retained as an addition to the reserves, if designated as such by management.

#### Note 5 - Refundable member fees - TPR

Refundable member fees consisted of interest-bearing cash balances.

### Notes to Financial Statements Years Ended December 31, 2014 and 2013

Changes in the refundable member fees are as follows at December 31:

	 2014	2013		
Beginning balance	\$ 185,407	\$	232,615	
Interest income Refunds to former residents	 133 (32,272)	***************************************	(47,208)	
Ending balance	\$ 153,268	\$	185,407	

A transfer to the operating account from this reserve account in the amount of \$2,507 was made in January 2015 reflecting year-end adjustments.

The refundable member fees represent the refundable deposits paid by TPR Members upon their purchase of a condominium and continuing care memberships. When a condominium is transferred, the deposit is refunded to the seller. There are no restrictions placed on these funds. Effective in 2007, management changed the policy regarding refundable member deposits. New purchasers now pay a nonrefundable processing fee which is recognized as revenue. The balance of refundable member deposits will continue to decrease as purchasers under the old policy sell their units. The amount likely to be refunded during any particular time period is not possible to accurately predict.

#### Note 6 - Operating reserves - TPR

Operating reserve consisted of interest-bearing cash balances.

Changes in the operating reserves are as follows at December 31:

	2014		2013		
Beginning balance	\$	1,381,071	\$	1,406,304	
Interest income Utilized for TPR operations		1,069 (139,773)	**************************************	537 (25,770)	
Net changes during the year		(138,704)		(25,233)	
Ending balance	\$	1,242,367	\$	1,381,071	

A transfer to the operating account from this reserve account in the amount of \$139,794 was made in January 2015 reflecting year-end adjustments.

The operating reserves balances reflect TPR's accumulated excess of revenue over expenses as of December 31, 2014 and 2013. The reserves may be utilized if the Company experiences an unanticipated increase in the costs of future operations.

### Notes to Financial Statements Years Ended December 31, 2014 and 2013

#### Note 7 - Property and equipment

Property and equipment is summarized as follows at December 31:

	2014			2013		
Artwork and artifacts Leasehold improvements Furnishings, fixtures and equipment Vehicles Construction in process	\$	220,794 5,019,477 4,962,044 341,347 624,216	<b>\$</b>	194,676 3,703,955 4,895,419 294,052 1,412,177		
Less accumulated depreciation	\$	11,167,878 (7,252,693) 3,915,185	\$	10,500,279 (6,622,289) 3,877,990		

#### Note 8 - Operating leases and transfer fees

The Company's lease with BAC entitles the Company to operate and manage TPR and to sell and resell continuing care memberships in TPR. The monthly base rent is \$32,300 through 2062.

Upon the resale of a condominium, the Company is entitled to a transfer fee equal to 10% of the seller's purchase price, plus 75% of any realized appreciation. The Company is required to pay 75% of the transfer fees received as contingent lease payments to BAC for certain common areas, through December 31, 2062. Transfer of the seller's membership occurs simultaneously with the sale of the condominium.

The contingent lease payments are subject to the transfer of condos which is a contingency that cannot be reasonably predicted. Contingent lease expense is recorded at the time that the condo is transferred. The amount of future contingent rents is not determinable.

### Note 9 - Transactions with related and other significant parties Related parties

The Company was charged for expenses of \$93,320 and \$90,145 from BRIDGE for staff costs and other expenses during 2014 and 2013, respectively. Of these amounts, \$0 and \$4,120 was payable as of December 31, 2014 and 2013, respectively.

The Company made transfers of \$200,000 and \$297,138 to BRIDGE during 2014 and 2013, respectively.200000

The Company paid fees of \$99,200 and \$122,000 to a BRIDGE board member in connection with marketing services provided during 2014 and 2013, respectively.

#### Notes to Financial Statements Years Ended December 31, 2014 and 2013

#### Other

During 2014 and 2013, there were transactions between the Company and BAC, as described in Note 8. The Company paid base and contingent rent of \$2,667,421 and \$2,400,855 during 2014 and 2013, respectively.

#### Note 10 - Continuing care disclosures

The Company has adopted the applicable accounting principles as described in the Financial Accounting Standards Board's Codification Section 954-430-35 and has considered the obligation to provide future services and use of the facilities to current Members as explained below.

#### Future service and continuing care contract costs

TPR annually calculates the expected costs of future services for the next year and adjusts the monthly fees billed to Members accordingly. The non-discounted estimated costs relating to the permanent care of Members are included in the annual budget. These costs are generally offset by insurance reimbursements and the monthly fees billed to those Members requiring permanent care. The Company may adjust monthly fees at any time with 60 days written notice to the Members. Accordingly, an estimated liability for possible future care costs, including outside skilled nursing facilities and long-term care costs, is not considered necessary and is not included in the financial statements.

Some TPR Members are covered by long-term care and Medicare supplemental group insurance policies with a private carrier, sponsored by TPR. The group policy is renewable annually and is non-cancelable by the insurer. Premium payments are the responsibility of the enrolled Members. TPR may subsidize premium payments from time to time (see Note 4).

#### Use of facilities costs

The obligation to provide future use of the facilities to current Members was estimated using an average remaining life expectancy per Member of 5.8 years. The estimated average annual cost of future repairs and replacements over that time period, as projected by an independent reserve study conducted by an outside consultant in October 2013, is \$817,700. These costs are expected to be fully funded from the replacement reserve, through the monthly fees paid by TPR Members (see Note 3) and interest earned on TPR reserves.

#### AB 1169 disclosures

Continuing care providers in the state of California are required to provide additional disclosures pursuant to Assembly Bill 1169, effective in May 2010. The required disclosures include amounts accumulated for contingencies and identified projects or purposes. TPR's accumulated cash reserves are disclosed in Notes 3 through 6. Accumulation of amounts for the purposes described in Notes 3 through 6 is permitted under TPR's nonprofit status as described in Section 501(c)(3) of the Internal Revenue Code. The purposes described in Notes 3 through 6 are consistent with the Company's taxexempt status.

### Notes to Financial Statements Years Ended December 31, 2014 and 2013

#### Note 11 - Employee benefit plan

The Company has an employee 403(b) plan covering eligible employees. The Company's contributions to the plan consist of an amount to match voluntary employee contributions, capped at 3% of employee earnings, plus a discretionary percentage based on eligible employees' compensation. Contributions totaled \$115,660 and \$115,841 for the years ended December 31, 2014 and 2013, respectively.

#### Note 12 - Contingencies

#### Litigation

The Company can be expected to be named in various claims and legal actions in the normal course of its activities. Based upon counsel and management's opinion, the outcome of such matters is not expected to have a material adverse effect on the Company's financial position or change in net assets.

#### Receivables from Members

As a nonprofit public benefit corporation, the Company does not terminate membership agreements when Members experience financial difficulties and are unable to fully pay their monthly fees. Instead, a reduced fee is arranged based on each Member's ability to pay, as determined by the Company. The monthly fee reduction under this arrangement is treated as a loan from the Company which is secured by the Member's interest in their condominium and is to be repaid upon sale of the condominium, along with interest. It is possible that the advances could exceed the sales value of the condominium. Management believes that none of the current advances outstanding, which total \$47,950 as of December 31, 2014, exceed the sales value of the Members' condominiums.

Certain Members who purchased their condominiums prior to 2007 are also entitled to remain Members after the sale of their condominiums. In this case, the sales proceeds are generally held in trust and withdrawals are made to fund the monthly fees if other resources are insufficient, at the discretion of the Company. One Member has exhausted her resources and the Company is paying for a portion of the ongoing costs of care, utilizing the healthcare insurance reserves to fund these costs (see Note 4).

#### Note 13 - Subsequent events

Management has evaluated subsequent events through April 29, 2015, the date on which the financial statements were available to be issued. No such events were required to be disclosed.



# The Peninsula Regent Schedules of Assets, Liabilities and Net Assets Years Ended December 31, 2014 and 2013

#### <u>Assets</u>

	2014			2013		
Current assets Cash						
Operating cash Designated for	\$	477,872	\$	345,576		
Replacement reserves Healthcare insurance reserves		1,579,240 1,600,955		1,562,327 1,688,329		
Refundable resident fees Operating reserves		153,268 1,242,367	<u></u>	185,407 1,381,071		
Total cash		5,053,702		5,162,710		
Receivables						
Residents Related party		52,347 30,065		93,704		
Other		8,237		59,740 18,354		
Prepaid expenses and other current assets		178,797	<del></del>	137,900		
Total current assets		5,323,148		5,472,408		
Noncurrent assets						
Receivables from residents - long-term Property and equipment, net		47,950 3,772,873		235,226 3,877,990		
Total noncurrent assets		3,820,823		4,113,216		
Total assets	\$	9,143,971	\$	9,585,624		

#### The Peninsula Regent Schedules of Assets, Liabilities and Net Assets Years Ended December 31, 2014 and 2013

#### Liabilities and Net Assets

	2014	2013	
Current liabilities Accounts payable and accrued liabilities Accrued payroll and related expenses Related party payable	\$ 133,430 199,123 1,707	\$ 267,436 157,236 1,697	
Total current liabilities	334,260	426,369	
Refundable resident fee	153,269	188,533	
Total liabilities	487,529	614,902	
Net assets Unrestricted net assets Restricted net assets	8,656,442	8,964,033 6,689	
Total net assets	8,656,442	8,970,722	
Total liabilities and net assets	\$ 9,143,971	\$ 9,585,624	

#### The Peninsula Regent Schedules of Revenue, Expenses and Changes in Net Assets Year Ended December 31, 2014

	2014					
	Ur	restricted		orarily icted	-	Total
Support and revenue Resident fees and services Investment and interest income	\$	10,548,173 12,793	\$	-	\$	10,548,173 12,793
Total support and revenue		10,560,966		*		10,560,966
Expenses						
Taxes, utilities and insurance Food services Health services Purchased care services Housekeeping Activities, security, laundry and reception		863,687 2,562,394 1,102,656 236,082 885,504 948,763		-		863,687 2,562,394 1,102,656 236,082 885,504 948,763
General and administrative, general services and marketing Repairs and maintenance Management fees Sustaining fees Depreciation		1,986,432 1,222,004 50,004 387,317 630,403		- - -		1,986,432 1,222,004 50,004 387,317 630,403
Total expenses		10,875,246		-		10,875,246
Change in net assets		(314,280)		-		(314,280)
Add back depreciation and amortization - non-cash items		630,403	<del>Viendamin kilosia</del>	-	***************************************	630,403
Excess of revenue over expenses before designated utilization (allocation)		316,123		-		316,123
Designated utilization (allocation) Deposits to replacement reserve Utilization of replacement reserve Utilization of healthcare insurance reserves Utilization of operating reserve		(672,204) 130,001 87,374 138,704			<del></del>	(672,204) 130,001 87,374 138,704
Excess (deficiency) of revenue over expenses	\$	(2)	\$		\$	(2)

#### The Peninsula Regent Schedules of Revenue, Expenses and Changes in Net Assets Year Ended December 31, 2013

	2013					
	L	Inrestricted	Te	emporarily		Total
Support and revenue						
Resident fees and services	\$	10,697,989	\$	-	\$	10,697,989
Investment and interest income Contributions		12,921		440.740		12,921
Net assets released from restrictions		147,699		148,716 (147,699)		148,716
Total support and revenue	~~~~~	10,858,609	• *******	1,017		10.850.636
, ,				1,011		10,859,626
Expenses		0.40.000				
Taxes, utilities and insurance Food services		842,072		-		842,072
Health services		2,442,836		-		2,442,836
Purchased care services		1,009,710		-		1,009,710
Medical insurance premiums		357,641		-		357,641
Housekeeping		558,446		_		558,446
Activities, security, laundry and reception		824,551 879,302		-		824,551
General and administrative, general		019,002		-		879,302
services and marketing		1,866,377				4 000 077
Repairs and maintenance		1,086,918		<u>-</u>		1,866,377
Homeowners' association dues		74,520		_		1,086,918
Management fees		50,004		_		74,520
Sustaining fees		385,752				50,004
Depreciation		561,301		-		385,752 561,301
•		001,001				301,301
Total expenses	***************************************	10,939,430		<del></del>		10,939,430
Change in net assets		(80,821)		1,017		(79,804)
Add back depreciation and amortization -						
non-cash items		561,301				561,301
Excess of revenue over expenses before						
designated utilization (allocation)		480,480		1,017		481,497
Designated utilization (allocation)						
Deposits to temporary restricted net assets		_		(1,017)		(4.047)
Deposits to replacement reserve		(662,196)		(1,017)		(1,017)
Utilization of replacement reserve				-		(662,196)
Utilization of healthcare insurance reserves		40,000		-		40,000
Deposit interest to reserve funds		113,265		-		113,265
Utilization of operating reserve		(1,141)		-		(1,141)
Offitzation of operating reserve		25,770		-		25,770
Excess (deficiency) of revenue over expenses	\$	(3,822)	\$	<del>.</del>	\$	(3,822)

Reserve Reports Filed with the
State of California
Department of Social Services
Continuing Care Contracts Branch and
Independent Auditor's Report

December 31, 2014

#### <u>Index</u>

	<u>Page</u>
Independent Auditor's Report	2
Reserve Reports	
Form 5-1	4
Form 5-2	5
Form 5-3	6
Form 5-4	8
Form 5-5	11

#### Independent Auditor's Report

Board of Directors
Bay Area Senior Services, Inc.

We have audited the accompanying continuing care reserve reports (the "Reports") of Bay Area Senior Services, Inc. (the "Company"), a California nonprofit public benefit corporation, as of December 31, 2014.

Management's Responsibility for the Report

Management is responsible for the preparation and fair presentation of these Reports in accordance with the report preparation provision of California Health and Safety Code Section 1792; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of the Reports that is free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these Reports based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the Reports are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the Reports. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the Reports, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the Reports in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the Reports.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Opinion

In our opinion, the Reports referred to above present fairly, in all material respects, the liquid reserve requirements of Bay Area Senior Services, Inc. as of December 31, 2014, in conformity with the report preparation provision of California Health and Safety Code Section 1792 referred to above.

#### Basis of Accounting

The Reports were prepared by the Company on the basis of the report preparation provision of California Health and Safety Code Section 1792, which is a basis of accounting other than accounting principles generally accepted in the United States of America, to comply with the provisions of California Health and Safety Code Section 1792 referred to above. Our opinion is not modified with respect to that matter.

#### Report on Audited Financial Statements

We have audited, in accordance with auditing standards generally accepted in the United States of America, the financial statements of the Company as of and for the year ended December 31, 2014, and our reports thereon dated April 29, 2015, expressed an unmodified opinion on the Company's financial statements.

#### Restriction on Use

The Reports of Bay Area Senior Services, Inc. is intended solely for the use of the Company's board of directors, management and for filing with the California Department of Social Services and is not intended to be and should not be used for any other purpose. However, this report is a matter of public record and its distribution is not limited.

Los Angeles, California

CohnReynickLLF

May 22, 2015

# FORM 5-1 LONG-TERM DEBT INCURRED IN A PRIOR FISCAL YEAR (Including Balloon Debt)

	(a)	(b)	(c)	(d)	(c)
Long-Term Debt Obligation	Date Incurred	Principal Paid During Fiscal Year	Interest Paid During Fiscal Year	Credit Enhancement Premiums Paid in Fiscal Year	Total Paid (columns (b) + (c) + (d))
2					
3					
4				**************************************	
5					
6					
7					
8					
		TOTAL:	\$0	\$0	\$0

(Transfer this amount to Form 5-3, Line 1)

NOTE: For column (b), do not include voluntary payments made to pay down principal.

PROVIDER: Bay Area Senior Services, Inc.

FOIMS-1

# FORM 5-2 LONG-TERM DEBT INCURRED DURING FISCAL YEAR (Including Balloon Debt)

	(a)	(b)	(Including Balloon Debt)		
]	(4)	(0)	(c)	(d)	(e)
Long-Term Debt Obligation	Date Incurred	Total Interest Paid During Fiscal Year	Amount of Most Recent Payment on the Debt	Number of Payments over next 12 months	Reserve Requirement (see instruction 5) (columns (c) x (d))
1			•		
2					
3					
4	***************************************				
5					
6					
7				·	
8				-	
	TOTAL:	\$0	\$0	\$0	\$0

(Transfer this amount to Form 5-3, Line 2)

NOTE: For column (b), do not include voluntary payments made to pay down principal.

PROVIDER: Bay Area Senior Services, Inc.

100005-2

#### FORM 5-3 CALCULATION OF LONG-TERM DEBT RESERVE AMOUNT

Line	CALCULATION OF LONG-TERM DEBT RESERVE AMOUNT	TOTAL
1	Total from Form 5-1 bottom of Column (c)	\$0
2	Total from Form 5-2 bottom of Column (e)	\$0
3	Facility leasehold or rental payment paid by provider during fiscal year.  (including related payments such as lease insurance)	\$2,667,421
4	TOTAL AMOUNT REQUIRED FOR LONG-TERM DEBT RESERVE:	\$2,667,421

PROVIDER:	Bay Area	Senior	Services,	Inc.	

101M5-3

## Bay Area Senior Services, Inc. (A California Nonprofit Public Benefit Corporation)

#### Calculation of Long-Term Debt Reserve Amount – Form 5-3 Reconciliation to 2014 Audited Financial Statements December 31, 2014

Total lease expense		
The Peninsula Regent		
Sustaining fee <sup>(1)</sup>	\$	387,317
Bass - Corporate		
Rent (see calculation below) <sup>(2)</sup>		2,280,104
Total lease expense (Line 3)	\$	2,667,421
Transfer fee revenue <sup>(3)</sup>	\$	3,040,138
Net transfer fee revenue - 25% of transfer fee revenue (3)	Markhamathamaganagan	(760,034)
Total rent expense		2,280,104

<sup>(1)</sup> Please refer to the Supplementary Information - Schedule of Revenue, Expenses and Changes in Net Assets

<sup>(2)</sup> Please refer to the Statement of Functional Expenses

<sup>(3)</sup> Please refer to the Statement of Activities and Note 8

#### FORM 5-4 CALCULATION OF NET OPERATING EXPENSES

Line		Amounts	TOTAL
1	Total operating expenses from financial statements		\$10,487,929
2	Deductions	·	, , , , , , , , , , , , , , , , , , , ,
а	Interest paid on long-term debt (see instructions)	\$0	
ь	Credit enhancement premiums paid for long-term debt (see instructions)	\$0	
c	Depreciation	\$630,403	
d	Amortization	\$0	
e	Revenues received during the fiscal year for services to persons who did not have a continuing care contract	\$174,628	
1	Extraordinary expenses approved by the Department	\$0	
3 4	Total Deductions Net Operating Expenses	<del>,</del>	\$805,031
<u>-</u>	Divide Line A by 266 and over the control	***************************************	\$9,682,898
5	Divide Line 4 by 365 and enter the result.		\$26,528
6	Multiply Line 5 by 75 and enter the result. This is the provider's operating exper	nse reserve mount.	\$1,989,600

	Bay Area Senior Services, Inc.
COMMUNITY:	The Peninsula Regent

100m 5-4

### Bay Area Senior Services, Inc. (A California Nonprofit Public Benefit Corporation)

#### Calculation of Net Operating Expenses – Form 5-4 Reconciliation to 2014 Audited Financial Statements December 31, 2014

Support and revenue for TPR:		
Resident fees and services	\$	10,221,162
Services to guests of residents (Form 5-4, Line 2e)		174,628
Services not covered by monthly service fees		152,383
Subtotal		10,548,173
Investment and interest income <sup>(1)</sup>		12,793
Total support and revenue for TPR <sup>(1)</sup>		10,560,966
Adjustments for Corporate revenue:		
Decrease in residents accounts receivable <sup>(4)</sup>		41,357
Decrease in other accounts receivable <sup>(4)</sup>		10,182
Decrease in receivables from residents - long-term <sup>(4)</sup>		187,276
Decrease in refundable member fees <sup>(5)</sup>		(35,264)
Transfer fee revenue <sup>(3)</sup>		3,040,138
Subtotal		3,243,689
	***************************************	
Total reported on the Statement of Cash Flows	<u>\$</u>	13,804,655

<sup>(1)</sup> Please refer to the Supplementary Information - Schedule of Revenue, Expenses and Changes in Net Assets

<sup>(3)</sup> Please refer to the Statement of Activities and Note 8

<sup>(4)</sup> Please refer to the Statement of Financial Position

<sup>(5)</sup> Please refer to the Statement of Financial Position and Note 5

### Bay Area Senior Services, Inc. (A California Nonprofit Public Benefit Corporation)

#### Calculation of Net Operating Expenses – Form 5-4 Reconciliation to 2014 Audited Financial Statements December 31, 2014

Expenses for TPR:		
Resident services	\$	5,785,403
General and administrative <sup>(1)</sup>		1,986,432
Taxes, utilities and insurance <sup>(1)</sup>		863,687
Repairs and maintenance <sup>(1)</sup>		1,222,004
Depreciation (Form 5-4, Line 2e) <sup>(1)</sup>		630,403
Operating expenses (Form 5-4, Line 1)		10,487,929
Sustaining fees (lease) <sup>(1)</sup>		387,317
Total expenses for TPR <sup>(1)</sup>		10,875,246
Adjustments for Corporate expenses:		
Rent expense - 75% of transfer fee revenue (Form 5-3) <sup>(2)</sup>		2,280,104
Intercompany management fee (eliminated)		(50,004)
Transfer to BRIDGE		200,000
Subtotal	***************************************	2,430,100
Total TPR expenses reported on the Statement of Functional Expenses	\$	13,305,346

<sup>(1)</sup> Please refer to the Supplementary Information - Schedule of Revenue, Expenses and Changes in Net Assets

<sup>(2)</sup> Please refer to the Statement of Functional Expenses

#### FORM 5-5 ANNUAL RESERVE CERTIFICATION

	vider Name: <u>Bay Area Senior Servic</u> cal Year Ended: December 31, 2014				
We the	have reviewed our debt service res period ended <u>December 31, 2014</u>	erve and o and are	perating expense reservent in compliance with tho	e require se requir	ements as of, and for ements.
Our as fo	liquid reserve requirements, compollows:	uted using	the audited financial st	atements	for the fiscal year are
£11	Debt Service Reserve Amount		Amou	<u>nt</u>	
[1] [2]	Operating Expense Reserve Amoun	1			67,421
6-1	o p			\$1,9	89,600
[3]	Total Liquid Reserve Amount:			\$4,6	57,021
Qua	lifying assets sufficient to fulfill the	e above red		Amount	
	Qualifying Asset Description	<u>Deb</u> t	(market val <u>t Service Reserve</u>	ue at end	of quarter) Operating Reserve
[4]	Cash and Cash Equivalents		\$1,851,482		\$4,900,434
[5]	Investment Securities			_	
[6]	Equity Securities			_	
[7]	Unused/Available Lines of Credit				
[8]	Unused/Available Letters of Credit				
[9]	Debt Service Reserve				(not applicable)
[10]	Other: Transfer Fees		\$2,280,104	_	
	(describe qualifying asset)				
	otal Amount of Qualifying Assets				
Li	sted for Liquid Reserve:	[11] _	\$4,131,586	[12] _	\$4,900,434
То	tal Amount Required:	[13]	\$2,667,421	[14] _	\$1,989,600
Su	rplus/(Deficiency):	[15]	\$1,464,165	[16] _	\$2,910,834
Signat	ture:			1	
			Date: 5/27//	/ /	
(Autho	orized Representative)	·	Date:/	<u>ک</u>	
Gary	Homan, Director, Business Services				
(Title)					1011115-5

#### Date Prepared: 4/29/15

# Continuing Care Retirement Community Disclosure Statement General Information

FACILITY NAME: The Penir	sula Regent						
ADDRESS: 1 Baldwin Ave		ZIP CODE:	94401	PHONE: 650-5	79-5500		
PROVIDER NAME: Bay Are	a Senior Services, In	C.		FACIL	ITY OPERATOR	: Bay Area Seni	
RELATED FACILITIES: Non					S AFFILIATION	**************************************	
	OF □ SI					MILES TO SH	OPPING CTR: 2.5
OPENED: 1988 AC	RES: <u>2</u> ST	TORY STO	RY 🗆 OTHER:_			MILES T	O HOSPITAL: 4
			******		* * * * * * *	*****	*******
NUMBER OF UNITS:		TAL LIVING			EALTH CARE		
	APARTMENTS — STUDI			ASSISTED L	***************************************		
	APARTMENTS — 1 BDR			SKILLED NO		<del></del>	
A	IPARTMENTS — 2 BDR			SPECIAL	CARE: 0		
	COTTAGES/HOUSI		DES	CRIPTION: > 1	V/A		
RLU OCCUP/	ANCY (%) AT YEAR EN	D: 93.2%	>			****	
TYPE OF OWNERSHIP:	☑ NOT-FOR-PROFI	T 🗆 FOR- I					* * * * * * * * * *
PODE OF COUTDACT	ED COMMUNIO CA	ne	- 1157 51 br				
FORM OF CONTRACT:	CONTINUING CA		□ LIFE CARE		RANCE FEE		OR SERVICE
(Check all that apply)	ASSIGNMENT OF	. 922E12	<b>⊿</b> EQUITY	LJ MEN	IBERSHIP	□ RENTA	\L
REFUND PROVISIONS: (CA	heck all that apply)	□90% □75	% □50% □	FULLY AMORT	ZED COTH	R; No entrance	fee
RANGE OF ENTRANCE FEI	ES: \$ <u>0</u>	- \$ <u>0</u>		LONG-TER	M CARE INS	URANCE REQU	IRED? 🗆 YES 📾 NO
HEALTH CARE BENEFITS I	NCLUDED IN CON	TRACT: Acc	ess to assisted liv	ing and home	care visits		
ENTRY REQUIREMENTS:	MIN. AGE: <u>60</u>	PRIOR PROFES	SION: N/A		OTHE	R: N/A	
RESIDENT REPRESENTAT					<del>/////////////////////////////////////</del>		
> participates in all communi			ezeine men man	ivement): > 3	selected by th	e resident counci	I, serves a 3 year term,
* * * * * * * * * * * * * * * *	······································	ž					
			SERVICES AND	AMENITIES			******
COMMON AREA AMENIT	IFS AVAILARIE	FEE FOR SERVIC		CES AVAILAB	1 E 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ICLUDED IN FEE	EAD EVIDA CHARCE
BEAUTY/BARBER SHOP		<u> </u>		G (4 TIMES/			FOR EXTRA CHARGE
BILLIARD ROOM	<u></u>		MEALS (1 /		moning	<b>☑</b>	
BOWLING GREEN			SPECIAL DIETS			<b>₹</b>	
CARD ROOMS	<u></u>		31 LCIAL DILI3	NINICAUCE		14.1	
CHAPEL			24-HOUR EME	RGENCY RESPO	ICE	<b>V</b>	П
COFFEE SHOP			ACTIVITIES PR		132		
CRAFT ROOMS	$\overline{\square}$	H		EXCEPT PHONE		H	
EXERCISE ROOM	<u> </u>		APARTMENT M			d	
GOLF COURSE ACCESS	ī		CABLE TV				
LIBRARY	<u></u>		LINENS FURNIS	CHFD		<b>☑</b>	
PUTTING GREEN	F		LINENS LAUND			<b>7</b>	
SHUFFLEBOARD	Ħ		MEDICATION A			Ħ	
SPA	<u> </u>		NURSING/WEL				
SWIMMING POOL-INDOOR	<u> </u>		PERSONAL HO			7	<u>□</u>
SWIMMING POOL-OUTDOOR	百	ā	TRANSPORTAT			7	
TENNIS COURT				ION-PREARRAN	GED		
WORKSHOP	$\overline{\square}$	ā	OTHER		<del></del>		
OTHER	Ē	$\overline{\Box}$	- · · · · · · · · · · · · · · · · · · ·		···	<b></b>	نبا

All providers are required by Health and Safety Code section 1789.) to provide this report to prospective residents before executing a deposit agreement or continuing care contract, or receiving any payment. Many communities are part of multi-facility operations which may influence financial reporting. Consumers are encouraged to ask questions of the continuing care retirement community that they are considering and to seek advice from professional advisors.

LOCATION (City, State)

PHONE (with area code)

SUBSIDIZED SENIOR HOUSING

None

INCOME COOKS OFF			2011	2012		20	13	2014
OPERATING INCOME								
(Excluding amortization of entrance fee income)		\$10,069	,379	\$10,685,079		\$10,850,47	<b>'6</b>	\$10,560,966
LESS OPERATING EXI								
(Excluding depreciation, amortization, and interest)		9,566,06	32	10,031,510		10,378,129		10,244,843
NET INCOME FROM OPERATIONS		503,353		653,569		472,347		316,123
LESS INTEREST EXPE	<b>VSE</b>	0		0		0		0
PLUS CONTRIBUTION	S	0	·····	0		0		0
PLUS NON-OPERATIN excluding extraordinary	G INCOME (EXPENSES items)	0		0		0		0
NET INCOME (LOSS) E EES, DEPRECIATION	EFORE ENTRANCE AND AMORTIZATION	\$503,353	3	\$653,569	المناسبة والمناسبة والمناس	\$472,347		\$ 316,123
VET CASH FLOW FROM Total Deposits Less Refu		\$0		\$0		en.		20
olai poposiis coss nola	uasj			30		\$0		\$0
*******	********	• • • • •	*****	*****	* * * * *			
ESCRIPTION OF SEC	JRED DEBT (as of most.		year end)					
(FNDFD	OUTSTA		INTEREST	DATE		DAT		AMORTIZATIO
LENDER	BALA	NCE	RATE	ORIGINA	MOLL	MATU	JRITY	PERIOD
ne								
* * * * * * * * * *	* * * * * * * * * * * *	* * * * *	******	*****	* * * * *			
INANCIAL RATIOS (se	50 <sup>th</sup> Pe	nulas) C Medians rcentile ional)		012	* * * 4 3	2013	• • • • •	2014
	2013 CCA 50 <sup>th</sup> Pe <i>(opt</i> i	C Medians rcentile		012	* * * 4 3	2013		2014
EBT TO ASSET RATIO PERATING RATIO	2013 CCA 50 <sup>th</sup> Pe <i>(opt</i> a	C Medians rcentile		012	.96	2013	* * * * *	2014
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA	2013 CCA 50 <sup>th</sup> Pe <i>(opt</i> i	C Medians rcentile	.94	012	.96	2013		
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA	2013 CCA 50 <sup>th</sup> Pe <i>(opt</i> i	C Medians rcentile	2	012	.96	2013		
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA	2013 CCA 50 <sup>th</sup> Pe <i>(opt</i> i	C Medians rcentile	.94	012		2013	-	97
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA AYS CASH ON HAND	2013 CCA 50 <sup>th</sup> Pe <i>(opt</i> i	C Medians rcentile ional)	.94	****		2013		97
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVER/ AYS CASH ON HAND  STORICAL MONTHL	2013 CCA 50 <sup>th</sup> Pe <i>(opti</i> AGE RATIO RATIO	C Medians rcentile ional)	.94	****	182	2013	%	97
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVER/ AYS CASH ON HAND ISTORICAL MONTHL	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera) 2011	C Medians rcentile ional)  ye fee and 0	.94 205 Change Percentag 2012	e)	182			97
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA AYS CASH ON HAND ISTORICAL MONTHL STUDIO ONE BEDROOM	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera 2011  \$2,639  3.	C Medians rcentile ional)  ge Fee and C %	.94 205 Change Percentag 2012	e)	182	2013		97
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA AYS CASH ON HAND  STUDIO ONE BEDROOM TWO BEDROOM	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera 2011  \$2,639  3.	C Medians rcentile ional)  ge Fee and C %	.94 205 Change Percentag 2012	je) %	182	2013	%	2014
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EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA AYS CASH ON HAND STUDIO ONE BEDROOM TWO BEDROOM COTTAGE/HOUSE ASSISTED LIVING	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera 2011  \$2,639  3.	C Medians rcentile ional)  ge Fee and C %  9 \$	.94 205 Change Percentag 2012	(e) %	182	2013	% 3.5	2014 \$2,938
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA AYS CASH ON HAND  STUDIO ONE BEDROOM TWO BEDROOM COTTAGE/HOUSE ASSISTED LIVING SKILLED NURSING	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera 2011  \$2,639 \$3,397 3.	C Medians rcentile ional)  ge Fee and C %  9 \$	205 Change Percentag 2012 62,742 63,530	3.5 3.5	\$2,838 \$3,654	2013	% 3.5 3.5	2014 \$2,938 \$3,782
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PEBT TO ASSET RATIO PERATING RATIO PEBT SERVICE COVERA AYS CASH ON HAND  STUDIO ONE BEDROOM TWO BEDROOM COTTAGE/HOUSE ASSISTED LIVING SKILLED NURSING	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera 2011  \$2,639 \$3,397 3.	C Medians rcentile ional)  ge Fee and C %  9 \$	205 Change Percentag 2012 62,742 63,530	3.5 3.5	\$2,838 \$3,654	2013	% 3.5 3.5	2014 \$2,938 \$3,782
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA AYS CASH ON HAND  STUDIO ONE BEDROOM TWO BEDROOM COTTAGE/HOUSE ASSISTED LIVING SKILLED NURSING SPECIAL CARE	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera 2011  \$2,639 3,397 3,366 3.	C Medians rcentile ional)  ge Fee and C %  9 \$ 9 \$	205 Change Percentag 2012 62,742 63,530	3.5 3.5 3.5	\$2,838 \$3,654 \$3,620	2013	% 3.5 3.5	2014 \$2,938 \$3,782
EBT TO ASSET RATIO PERATING RATIO EBT SERVICE COVERA AYS CASH ON HAND  STUDIO ONE BEDROOM TWO BEDROOM COTTAGE/HOUSE ASSISTED LIVING SKILLED NURSING SPECIAL CARE	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera 2011  \$2,639 \$3,397 3.	C Medians rcentile ional)  ge Fee and C %  9 \$ 9 \$	205 Change Percentag 2012 62,742 63,530	3.5 3.5 3.5	\$2,838 \$3,654 \$3,620	2013	% 3.5 3.5	2014 \$2,938 \$3,782
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PEBT TO ASSET RATIO PERATING RATIO PEBT SERVICE COVERA PAYS CASH ON HAND STUDIO ONE BEDROOM TWO BEDROOM COTTAGE/HOUSE ASSISTED LIVING SKILLED NURSING SPECIAL CARE	2013 CCA 50 <sup>th</sup> Pe (option  AGE RATIO  RATIO  Y SERVICE FEES (Avera 2011  \$2,639 3,397 3,366 3.	C Medians rcentile ional)  ge Fee and C %  9 \$ 9 \$	205 Change Percentag 2012 62,742 63,530	3.5 3.5 3.5	\$2,838 \$3,654 \$3,620	2013	% 3.5 3.5	2014 \$2,938 \$3,782

#### **FINANCIAL RATIO FORMULAS**

#### LONG-TERM DEBT TO TOTAL ASSETS RATIO

Long-Term Debt, less Current Portion
Total Assets

#### **OPERATING RATIO**

**Total Operating Expenses** 

- Depreciation Expense
- Amortization Expense

Total Operating Revenues — Amortization of Deferred Revenue

#### **DEBT SERVICE COVERAGE RATIO**

Total Excess of Revenues over Expenses
+ Interest, Depreciation, and Amortization Expenses
Amortization of Beferred Revenue + Net Proceeds from Entrance Fees
Annual Debt Service

#### DAYS CASH ON HAND RATIO

Unrestricted Current Cash & Investments
+ Unrestricted Non-Current Cash & Investments

(Operating Expenses —Depreciation — Amortization)/365

NOTE: These formulas are also used by the Continuing Care Accreditation Commission. For each formula, that organization also publishes annual median figures for certain continuing care retirement communities.

## FORM 7-1 REPORT ON CCRC MONTHLY SERVICE FEES

			RESIDENTIAL LIVING	ASSISTED LIVING	SKILLED NURSING				
[1]		onthly Service Fees at							
		eginning of reporting period: adicate range, if applicable)	\$2,643-\$4,068	\$3,747	N/A				
[2]	in	dicate percentage of increase fees imposed during reporting							
		riod: idicate range, if applicable)	3.5%	3.5%					
	[	Check here if monthly serv reporting period. (If you ch form and specify the names	ecked this box, please	skip down to the bo	sed during the ottom of this				
[3]	Ind (If 1	icate the date the fee increase wanner than 1 increase was impler	as implemented: nented, indicate the da	tes for each increase	e.)				
[4]	Che	ck each of the appropriate boxe	s:						
		Each fee increase is based on tand economic indicators.	he provider's projected	l costs, prior year p	er capita costs,				
	M	All affected residents were giv prior to its implementation.	en written notice of th	is fee increase at lea	ist 30 days				
	X	At least 30 days prior to the increase in monthly service fees, the designated representative of the provider convened a meeting that all residents were invited to attend.							
	図	At the meeting with residents, the provider discussed and explained the reasons for the increase, the basis for determining the amount of the increase, and the data used for calculating the increase.							
	X	The provider provided resident held to discuss the fee increase	s with at least 14 days	advance notice of e	each meeting				
	図	The governing body of the proposted the notice of, and the agreement at least 14 days pri	genda for, the meeting	l representative of t in a conspicuous pl	he provider ace in the				
[5] (	On ar inclu	n attached page, provide a conci ding the amount of the increase	se explanation for the	increase in monthly	service fees				
PRO	VIDE	ER:_Bay Area Senior Service	s, Inc						
- • :1		IITY: The Peninsula Regent							



#### THE PENINSULA REGENT

November 1, 2013

Dear Member:

BASS and members agree that we should set rates at the level consistent with providing superior services. We undertook a careful process that involved the TPR management team, Bay Area Senior Services, BAC Associates, your Resident Council and its Finance Committee and suggestions from your fellow members. To achieve superior services for 2014 and balance the operating budget, there will be a 3.5% increase in the base monthly fee.

Optional specific services not utilized by all members will continue to be subject to a separate fee rather than made a part of the monthly fee. Those services and fees are detailed in the attached Membership Agreement Exhibit B, Incidental Charges.

Approximately half of the 2014 rate increase is committed to wage increases associated with providing these superior services. All changes in individual compensation are based on merit and the benefits of maintaining competitive compensation.

This budget also fully funds the reserve for capital improvements and equipment, consistent with the formal Replacement Reserve Study. The balance of the increase is necessary to meet the anticipated costs of insurance, utilities, food, supplies and repairs and maintenance of our building and grounds.

Management will also draw on Operating Reserves to cover some one-time and start-up costs in 2014. This action is the equivalent of a .75% change in the monthly fees.

Enclosed with this letter are the specific elements which make up your bill for your condo. Note that the only elements which have increased are the Service Fee and Long Term Care Insurance premium. The Leasehold Payment, the Homeowners' Association Dues, and the Medicare Supplemental premium (if applicable) remain the same. This means your total actual out-of-pocket cost may change by other than 3.5%.

Also enclosed with this letter is a report showing a five year history of the monthly fees.

Please contact me if you have questions or if you would like to discuss your specific circumstances.

Thank you,

Marianne Nannestad Executive Director



#### Incidental Charges 2014 Membership Agreement Exhibit B

Dining Services			Sales tax	applies*
Meals	M	<u>lember</u>	Guest*	Child(>7-1
Breakfast	\$	8.50	\$ 10.50	\$ 5.25
Lunch	\$	13.25	\$ 17.75	\$ 9.00
Dinner Symdow Brough ITaliday Nasala & BBOL	\$	17.00	\$ 22.25	\$ 11.00
Sunday Brunch, Holiday Meals & BBQ's	\$	18.50	\$ 29.00	\$ 15.00
Member Special Events Room Service Charge - per person/per meal		aries bas	ed on event	
Wine by the glass	\$	5.00		\$ 5.00
Wine by the bottle	\$	3.00*		
Soup to go	\$ \$	7.00*		
20up 10 go	Φ	3.00*	\$ 3.00*	per pint
Meal Plans				
Additional Daily Meal	\$	250.00	per month	
For consecutive absence longer than 14 days	\$	(60.00)	=	oactive to 1st day
For participation in the 21 monthly meals plan	\$	(80.00)	per month	and the day
For voluntarily withdrawing from all meal plans	\$	(270.00)	per month	
Catering services and private dining room use	Qu	oted Per	Event	
Server	\$ <sup>^</sup>	27.00	per hour	
Chef, Carver, Bartender	\$	38.00	per hour/per p	erson
Valet Parking (2 attendants - 4 hour minimum) Additional Attendant/s	69 <del>6</del> 9	350.00 30.00	per hour/per p	Jercon
	Ψ	20.00	her member b	or 2011
Building Services				
Iousekeeping Extra Services	\$	27.00	per hour	
extra Linen Service	\$	20.00	per month	
faintenance Service (charged in 15 min. increments)	\$	30.00	per hour	
ny materials purchased on behalf of the Member will be bil	led on the n	nonthly st	atement at ]	TPR's cost.



#### Incidental Charges 2014 Membership Agreement Exhibit B

Resi	dent	Services
子がからなれ	that which	こうかん んすかかい

		F-7747 - 1-1		
	\$			<u> </u>
	\$			
	\$			
	\$ \$			
	\$	90.00	plus tax	
	•			
2 0022				
	ψ	25.00	per month	
	Š	150.00		
	\$	50.00		
our minimum)	\$	100.00	per hour	<del></del>
Members Vehicle	8	35.00	•	
	\$	45.00	per hour	
	Bi	lled Dire	otly by Provide	r
t instructors)	Bi	lled Direc	ctly by Provider	r
	Bi	lled at Co	st	
	\$	20.00		
Made to the state of the state				
	\$	15.00		**************************************
	\$	32.00		
	\$	10.00		
	3)	20.00		
	our minimum)  Members Vehicle  TPR Vehicle  t instructors)	S S S S S S Single Tandem S S S S S S S S S S S S S S S S S S S	\$ 60.00 \$ 15.00 \$ 2.50 \$ 0.10 \$ 1.00 \$ 10.00 \$ 25.00 \$ 10.00 \$ 90.00 \$ 60.00 \$ 60.00  Single \$ 50.00 \$ 25.00 \$ 150.00 \$ 25.00 \$ 150.00 \$ 50.00  Tandem \$ 35.00 \$ 25.00  Billed Direct tinstructors)  Billed at Co \$ 20.00 \$ 15.00 \$ 32.00 \$ 30.00 \$ 30.00 \$ 30.00 \$ 32.00	\$ 60.00 \$ 15.00 \$ 2.50 \$ 0.10 per page \$ 1.00 per page \$ 1.00 per service \$ 90.00 plus tax \$ 50.00 \$ 60.00 \$ 60.00 \$ 50.00 \$ 50.00 \$ 15.00 \$ 10.00 per month \$ 150.00 \$ 50.00 \$ 50.00 \$ 15.00

Appointments not cancelled 24-hours in-advance will be charged for the scheduled services.



#### Health & Wellness Services

Private Duty Services Provided by Outside Agency Prothrombin Time Test TPR Administrative Fee for Non-Agency Caregiver - per member	Billed Directly by Provider \$ 8.00 \$ 50.00 per month
Services Provided by our Staff in your Condominium	
Care Staff Charges (non-temporary in nature - charged in 15 min. increments)	\$ 40.00 per hour
Wellness Management Plan	•
Level I	\$ 450.00 per month
Level II Level III	\$ 900.00 per month
	\$ 1,350.00 per month
Services Provided in Assisted Living	
Additional Meals	\$ 21.75 per day
(during temporary stay)	·
Temporary Residence and Care Fee	\$ 185.00 per day
(after temporary allowance)	, and a second
Assisted Member Fee (when eligible) *	\$ 3,747 ner mont
RCFE Residence and Care Fee *	\$ 4100 - 6200
* Selection based on specific membership agreement	per monti
Offsite Care	
Assisted Living Community	Dillod Timed 1 7
(after temporary allowance)	Billed Directly by Provider
Skilled Nursing Facility	Billed Directly by Provider
	-) 0) 110/1001



# THE PENINSULA REGENT

#### 5 Year Rate History

	2010	2011	2012	_2013	2014
Base Monthly Fee					<del></del>
$\mathbf{A}$	2,340	2,375	2,468	2,554	2,643
B/C	2,698	2,738	2,845	2,945	3,048
D/E	3,166	3,213	3,339	3,456	3,577
F/G/H	3,600	3,654	3,797	3,930	4,068
2nd Person	1,349	1,369	1,423	1,473	1,525
Assisted Membership	3,316	3,366	3,497	3,620	3,747
HOA Dues	30	30	30	30	30
Change from Previous Year					
A	2.8%	1.5%	3.9%	3.5%	3.5%
B/C	2.7%	1.5%	3.9%	3.5%	0,0
D/E	2.8%	1.5%	3.9%	3.5%	/ 0
F/G/H	2.7%	1.5%	3.9%	3.5%	
2nd Person	2.7%	1.5%	3.9%	3.5%	- 12.0
Assisted Membership	2.8%	1.5%	3.9%	3.5%	/ 0
HOA Dues	20.0%	0.0%	0.0%	0.0%	0.0%
Cumulative Average Rate Change					3.0%
Voluntary Group Insurance Premi:	ims				
Medicare Supplemental (closed to new enrollments)	271	271	271	271	271
Long Term Care	195	195	195	234	254
Fixed Leasehold Payment (also calle	d Sustaining	Fee)			
		00-150	100-150	100-150	100-150
(set on move-in, remains constant	through-out	occupanc	y, per perso	on)	<del>-</del>

# KEY INDICATORS REPORT

# Bay Area Senior Services, Inc.

Please attach an explanatory memo that summarizes indica

# OPER

# MARC

CAPIT

1		ial Officer Signature
/	7	Thief Financial Office
		Chief F

ignificant trends or variances in the key operational			Actual			Projected		Dome	4000			
ndicators.						navasforr		rore	rorecast		Preferred	
DERATIONAL STATISTICS	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Trend Indicator	
1. Average Annual Occupancy by Site (%)	80.40%	83.49%	85.69%	90.31%	90.31%	92.52%	92.08%	93.84%	93.84%	93.84%	N/A	
4ARGIN (PROFITABILITY) INDICATORS 2. Net Operating Margin (%)	4.00%	4.00%	2.00%	3.00%	3.00%	4.00%	4.00%	4.00%	2.00%	2.00%	<b>*</b>	
3. Net Operating Margin - Adjusted (%)	4.00%	4.00%	2.00%	3.00%	3.00%	4.00%	4.00%	4.00%	2.00%	5.00%	<b>→</b>	
IQUIDITY INDICATORS 4. Unrestricted Cash and Investments (\$000)	\$6,729	\$6,010	\$7,151	\$6,779	\$6,905	\$6,713	\$6,184	\$5.911	\$5.493	\$5.140	•	
5. Days Cash on Hand (Unrestricted)	259	230	261	239	247	233	205	189	169	154	- ←	
APITAL STRUCTURE INDICATORS								19		19		
6. Deferred Revenue from Entrance Fees (\$000)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	N/A	
7. Net Annual E/F proceeds (\$000)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	N/A	
8. Unrestricted Net Assets (\$000)	\$15,237	\$13,562	\$9,897	\$9,822	\$9,875	\$9,888	\$9,948	\$9,989	\$10,053	\$10,120	N/A	
9. Annual Capital Asset Expenditure (\$000)	\$413	\$1,117	\$599	\$1,104	\$668	\$600	\$1,010	\$773	966\$	\$984	N/A	
10. Annual Debt Service Coverage Revenue Basis (x)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	<b>+</b>	
11. Annual Debt Service Coverage (x)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	<b>←</b>	
12. Annual Debt Service/Revenue (%)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	<b>→</b>	
13. Average Annual Effective Interest Rate (%)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	<b>→</b>	
14. Unrestricted Cash & Investments/ Long-Term Debt (%)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	<b>+</b>	
15. Average Age of Facility (years)	12.19	11.88	11.19	11.8	12.93	13.21	13.65	13.85	13.78	13.9	<b>→</b>	

Date Prepared: 6/26/15

# KEY INDICATORS REPORT - 2014 BAY AREA SENIOR SERVICES, INC. (BASS) FOOTNOTES

#### Line#

- 1. BASS has a single community The Peninsula Regent.
- 2. We base the charges to the residents on the amount needed to cover operating costs and fund reserves. The net operating margin now represents approximately the amount needed to fund replacement reserves at the appropriate level.
- 3. There are no entrance fees, so this calculation is the same as line 2.
- 4. Significant capital expenditures are planned for 2016 and 2018. Cash & investments drop accordingly at that point.
- 5. As noted in 4 above, the days cash on hand drops as a result of the major capital expenditure in 2016 and 2018.
- 6. There are no entrance fees.
- 7. There are no entrance fees.
- 8. The unrestricted net assets will grow slightly, consistent with the operating margin assumption.
- 9. The amounts in the projected and forecast period are taken from the formal replacement reserve study.
- 10. BASS has no debt.
- 11. BASS has no debt.
- 12. BASS has no debt.
- 13. BASS has no debt.
- 14. BASS has no debt.
- 15. Consistent with planned capital investments.